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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	=	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint	Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Nora First name  E. Middle name  Cucalon Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6221		

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Debtor 1 Nora E. Cucalon Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
I. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live	137 Marina Bay Court	If Debtor 2 lives at a different address:			
		Highlands, NJ 07732  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Monmouth				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
ò.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Nora E. Cucalon Debtor 1 Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? □ Yes. District When Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. 

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

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Nora E. Cucalon Case number (if known) Debtor 1 Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, Bankruptcy Code, and are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). debtor or a debtor as defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Nora E. Cucalon Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Nora E. Cucalon			Case numb	per (if known)
Part	6: Answer These Quest	ions for R	eporting Purposes		
	What kind of debts do you have?	16a.	Are your debts primarily	consumer debts? Consumer debts are deersonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are debts vestment or through the operation of the bu	
			☐ No. Go to line 16c.	<b>5</b> .	
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	ı owe that are not consumer debts or busine	ess debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapt	er 7. Go to line 18.	
	Do you estimate that after any exempt	☐ Yes.		. Do you estimate that after any exempt pro available to distribute to unsecured creditors	perty is excluded and administrative expenses s?
	property is excluded and administrative expenses		□ No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do you estimate that you	1-49		☐ 1,000-5,000 ☐ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000
	owe?	☐ 50-99 ☐ 100-1		☐ 10,001-25,000	☐ More than100,000
		200-9			
19.	How much do you	□ \$0 - \$	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000	\$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		<b>■</b> \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	More than \$50 billion
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		<b>—</b> \$500,	OUT - \$1 IIIIIIOII		
Part	7: Sign Below				
For	you	I have ex	amined this petition, and I d	eclare under penalty of perjury that the info	rmation provided is true and correct.
				r 7, I am aware that I may proceed, if eligible relief available under each chapter, and I c	
				d not pay or agree to pay someone who is n the notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, United States Code, sp	ecified in this petition.
			cy case can result in fines up	nt, concealing property, or obtaining money p to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
			E. Cucalon	0'	or 2
			Cucalon e of Debtor 1	Signature of Debt	OT Z
		Executed	on October 8, 2021	Executed on	
			MM / DD / YYYY	MI	M / DD / YYYY

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Debtor 1 Nora E. Cucalon Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Steven	A. Serna	Date	October 8, 2021	
Signature of	f Attorney for Debtor		MM / DD / YYYY	
Steven A.	Serna			
Law Office	es of Steven A. Serna LLC			
5300 Berg Suite 300	enline Avenue			
<b>West New</b>	York, NJ 07093			
Number, Street,	, City, State & ZIP Code			
Contact phone	201-392-0303	Email address	bk@sernaesq.com	
029402002	2 NJ			
Bar number & S	Ptato .			

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		<b>D</b> o o a i i i o i i c	. age e e. e=	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nora E. Cucalon			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)				☐ Check if this amended fili

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	500,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,707.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	510,707.00
a	t 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	535,289.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	15,213.99
	Your total liabilities	\$	550,502.99
a	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,516.66
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,295.2
Pa	4: Answer These Questions for Administrative and Statistical Records		
ò.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	chedules.
<b>7</b> .	■ Yes What kind of debt do you have?		
	•		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Nora E. Cucalon Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\_4,516.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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o identify your								
	r case and th	is filing:						
a E. Cucalon								
ame	Middle	Name	Last Name					
ame	Middle	Name	Last Name					
Court for the:	DISTRICT	OF NEW J	ERSEY					
								Check if this is an amended filing
list and descril	be items. List a	e. If two ma	rried people are filing toge	ether, both are	equally resp	onsible for su	the ca	ng correct
sidence, Buildin	g, Land, or Otl	her Real Est	tate You Own or Have an I	interest In				
erty?  Court  or other description	n .	■ Si	the property? Check all that a ingle-family home uplex or multi-unit building ondominium or cooperative	аррју	the amount	of any secured	d clain	r exemptions. Put ns on <i>Schedule D:</i> cured by Property.
<b>Court</b> or other description	732-0000 ZIP Code	Si Si Ci	ingle-family home		Current va	of any secured Who Have Clain	d claim ns Sed Cur	ns on <i>Schedule D:</i>
Court or other description  NJ 07	732-0000	Si Dr Cr Cr M La In Tri Or Who has	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home	е	Current va entire prop	lue of the perty?  00,000.00  he nature of yees simple, tenae), if known.	Cur por	ns on Schedule D: cured by Property. rent value of the tion you own?
Court or other description  NJ 07	732-0000	Si Di Co M La In Ti Oi Who has	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and livestment property imeshare ther s an interest in the propert	е	Current va entire prop \$50 Describe t (such as fa a life estat	lue of the perty?  00,000.00  he nature of yees simple, tenae), if known.	Cur por	rent value of the tion you own? \$500,000.00 wnership interest
	Court for the:  06A/B B: Properties and accurate and accu	Court for the: DISTRICT	Court for the: DISTRICT OF NEW JOBA/B B: Property  Visit and describe items. List an asset on plete and accurate as possible. If two mass needed, attach a separate sheet to this sidence, Building, Land, or Other Real Est	Court for the: DISTRICT OF NEW JERSEY  D6A/B  B: Property  Visit and describe items. List an asset only once. If an asset fits in plete and accurate as possible. If two married people are filing togs a needed, attach a separate sheet to this form. On the top of any accidence, Building, Land, or Other Real Estate You Own or Have an Instance of the property of the p	Court for the: DISTRICT OF NEW JERSEY  DISTRICT OF NEW JERSEY	Court for the: DISTRICT OF NEW JERSEY  D6A/B  B: Property  Visit and describe items. List an asset only once. If an asset fits in more than one category, list plete and accurate as possible. If two married people are filing together, both are equally resp is needed, attach a separate sheet to this form. On the top of any additional pages, write your residence, Building, Land, or Other Real Estate You Own or Have an Interest In	Court for the: DISTRICT OF NEW JERSEY  DISTRICT OF NEW	Court for the: DISTRICT OF NEW JERSEY  D6A/B  B: Property  Visit and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the caplete and accurate as possible. If two married people are filling together, both are equally responsible for supplying a needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case numbered sidence, Building, Land, or Other Real Estate You Own or Have an Interest In

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debte	or 1 <b>N</b>	ora E. Cucalo	n		Case number (if known)	
. Ca	rs, vans,	trucks, tractors	s, sport utility ve	hicles, motorcycles		
	vlo.					
_						
-	res .					
		Nicean			Do not deduct sec	ured claims or exemptions. Put
3.1	Make:	Nissan		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Maxima		■ Debtor 1 only	Creditors Who Hav	ve Claims Secured by Property.
	Year:	2014		Debtor 2 only	Current value of t	
		nate mileage:	170,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other int	formation:		☐ At least one of the debtors and another		
				☐ Check if this is community property	\$4,600	.00 \$4,600.00
				(see instructions)		
3.2	Make:	Chrysler		Who has an interest in the property? Obstant	Do not deduct sec	ured claims or exemptions. Put
3.2		Town & Cou	intry	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:		and y	■ Debtor 1 only	Creditors who Hav	ve Claims Secured by Property.
	Year:	2008 nate mileage:	175,000	Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
		formation:	173,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Outer iiii	ormation.		At least one of the deptors and another		
				Check if this is community property (see instructions)	\$1,000	9.00 \$1,000.00
				n for all of your entries from Part 2, includin		\$5,600.00
	_				Į.	
art 3			and Household Ite			
Oo y	ou own c	or have any lega	il or equitable in	terest in any of the following items?		Current value of the portion you own?  Do not deduct secured
Но	usehold	goods and furn	ishings			claims or exemptions.
_	<i>amples:</i> No	Major appliances	s, furniture, linens	, china, kitchenware		
_		scribe				
_	. 55. 10					
		Н	lousehold item	IS .		\$2,400.00
Fle	ctronics					
			radios; audio, vide	eo, stereo, and digital equipment; computers, p	orinters, scanners; music co	ollections; electronic devices
_		including cell ph	ones, cameras, m	nedia players, games		
	No					
	Yes. De	scribe				
		<b> </b>	lastania annlis			¢050.00
		E	lectonic applia	ances		\$850.00
٠.	llootilete	of value				
		s of value Antiques and figi	urines; paintings	prints, or other artwork; books, pictures, or other	er art objects: stamp. coin.	or baseball card collections:
_,			, memorabilia, co			
	No					
П	Yes. De	scribe				

Official Form 106A/B

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Debtor 1	Nora	E. Cuca	lon	_	Case nui	mber (if known)	
	musi		raphic, e		hobby equipment; bicycles, pool tables, golf clubs	, skis; canoes	and kayaks; carpentry tools;
☐ Yes	s. Describ	е					
10. <b>Firea</b> <i>Exar</i> ■ No	<i>mples:</i> Pist	ols, rifles,	shotgur	ns, ammunition, and	d related equipment		
☐ Yes	s. Describ	е					
11. <b>Cloth</b> <i>Exar</i> □ No	mples: Eve	ryday clo	thes, furs	s, leather coats, de	signer wear, shoes, accessories		
■ Yes	s. Describ	e					
		ĺ	Ordina	ary clothing & sl	noes		\$200.00
□ No	mples: Eve		elry, cos	stume jewelry, enga	agement rings, wedding rings, heirloom jewelry, wa	atches, gems,	gold, silver
			Jewelr	ry & watches			\$400.00
■ No	-				I not already list, including any health aids you	did not list	
			•		Part 3, including any entries for pages you have	e attached	\$3,850.00
Part 4:	Describe Yo	ur Financ	ial Assatı	e			
					n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Mor			•	ome, in a safe deposit box, and on hand when you	ı file your peti	tion
17. <b>Depo</b>	osits of mo	oney ecking, sa	vings, or	r other financial acc	counts; certificates of deposit; shares in credit unions with the same institution, list each.	ns, brokerage	houses, and other similar
□ No ■ Yes	s				Institution name:		
			17.1.	Checking	JP Morgan Chase		\$250.00
			17.2	Checking	PNC Bank		\$300.00

Official Form 106A/B

Case 21-17884-CMG Doc 1 Filed 10/08/21 Entered 10/08/21 17:24:07 Page 13 of 51 Document Debtor 1 Nora E. Cucalon Case number (if known) Other financial account Wells Fargo Bank (for Panda Transport LLC) \$220.00 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: Yes..... **Robin Hood account** \$487.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No ■ Yes. Give specific information about them..... Name of entity: % of ownership: Panda Transport LLC (no assets - only a bank 100 \$0.00 % N O N Transport LLC (open for Uber 100 \$0.00 transportation; no assets) % 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

Case 21-17884-CMG Doc 1 Filed 10/08/21 Entered 10/08/21 17:24:07 Desc Main Document Page 14 of 51 Debtor 1 Nora E. Cucalon Case number (if known) 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: Term life insurance policy with Fidelity Oscar Cucalon & & Guaranty Life Insurance Company Jonathan, Jason & \$0.00 **Nicole Cucalon** Term Life Insurace policy with Jackson **Oscar Cucalon and National Life Insurance** Jason, Jonathan & \$0.00 **Nicole Cucalon** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

35. Any financial assets you did not already list

■ No

□ Yes. Give specific information..

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Describe each claim.......

■ No

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Debtor 1	Nora E. Cucalon	Page 15 01 :	Case number (if known)	
	the dollar value of all of your entries from Part 4, includin Part 4. Write that number here	g any entries for pag	es you have attached	\$1,257.00
Part 5: D	escribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ite in Part 1.	
-	ı own or have any legal or equitable interest in any business-relate	ed property?		
No. 0	Go to Part 6.			
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
16. <b>Do y</b> o	ou own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
■ No	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	ou have other property of any kind you did not already list?  nples: Season tickets, country club membership	?		
☐ Yes	s. Give specific information			
54. <b>Add</b>	the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Par</b> t	: 1: Total real estate, line 2			\$500,000.00
56. <b>Par</b> t	2: Total vehicles, line 5	\$5,600.00	_	
57. <b>Par</b> t	3: Total personal and household items, line 15	\$3,850.00		
58. <b>Par</b> t	4: Total financial assets, line 36	\$1,257.00		
59. <b>Par</b> t	5: Total business-related property, line 45	\$0.00		
60. <b>Par</b> t	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Par</b>	7: Total other property not listed, line 54 +	\$0.00		
62. <b>Tot</b> a	al personal property. Add lines 56 through 61	\$10,707.00	Copy personal property total	\$10,707.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$510,707.00

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Fill in this inform	ill in this information to identify your case:				
Debtor 1	Nora E. Cucalon				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number					
(if known)					Check if this is an amended filing

### Official Form 106C

Part 1: Identify the Property You Claim as Exempt

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.				
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	137 Marina Bay Court Highlands, NJ	\$500,000.00		\$0.00	11 U.S.C. § 522(d)(1)
	<b>07732 Monmouth County</b> Line from <i>Schedule A/B</i> : <b>1.1</b>			100% of fair market value, up to any applicable statutory limit	
	2014 Nissan Maxima 170,000 miles	\$4,600.00			11 U.S.C. § 522(d)(2)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2014 Nissan Maxima 170,000 miles	\$4,600.00		\$1,600.00	11 U.S.C. § 522(d)(5)
	Line from Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
	2008 Chrysler Town & Country 175,000 miles	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(2)
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	Household items Line from Schedule A/B: 6.1	\$2,400.00	•	\$2,400.00	11 U.S.C. § 522(d)(3)
	Line Irom Schedule A/B: 0.1			100% of fair market value, up to any applicable statutory limit	

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otor 1 Nora E. Cucalon			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property			unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Electonic appliances Line from Schedule A/B: 7.1	\$850.00		\$850.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
Ordinary clothing & shoes Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
Ellie Holli Gonedale A/B. TTT			100% of fair market value, up to any applicable statutory limit	
Jewelry & watches Line from Schedule A/B: 12.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(4)
			100% of fair market value, up to any applicable statutory limit	
Checking: JP Morgan Chase Line from Schedule A/B: 17.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: PNC Bank Line from Schedule A/B: 17.2	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Other financial account: Wells Fargo Bank (for Panda Transport LLC)	\$220.00		\$220.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Robin Hood account Line from Schedule A/B: 18.1	\$487.00		\$487.00	11 U.S.C. § 522(d)(5)
Zino iloni concadio / v.Z. 1611			100% of fair market value, up to any applicable statutory limit	
Panda Transport LLC (no assets - only a bank account)	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
100 % ownership Line from <i>Schedule A/B</i> : 19.1			100% of fair market value, up to any applicable statutory limit	
N O N Transport LLC (open for Uber transportation; no assets)	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
100 % ownership Line from <i>Schedule A/B</i> : 19.2			100% of fair market value, up to any applicable statutory limit	
Term life insurance policy with Fidelity & Guaranty Life Insurance	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Company Beneficiary: Oscar Cucalon & Jonathan, Jason & Nicole Cucalon Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
Term Life Insurace policy with Jackson National Life Insurance	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Oscar Cucalon and Jason, Jonathan & Nicole Cucalon Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	

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Del	otor 1	Nora E. Cucalon	Case number (if known)	
3.	(Sub	<b>You claiming a homestead exemption of more than \$170,350?</b> ect to adjustment on 4/01/22 and every 3 years after that for cases filed on or No	r after the date of adjustment.)	
		Yes. Did you acquire the property covered by the exemption within 1,215 day	s before you filed this case?	
		□ No		
		□ Yes		

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			Document	Page 1	.9 of 51		
Fill in t	his information	on to identify you	r case:				
Debtor	1 <b>N</b>	Nora E Cucalor	1				
D obto.			Middle Name	Last Name		-	
Debtor :	_					_	
(Spouse if	, filing) F	irst Name	Middle Name	Last Name			
United S	States Bankru	ptcy Court for the:	DISTRICT OF NEW JERSEY	<u> </u>		-	
Case nu	umber						
(if known)						☐ Che	ck if this is an
						ame	ended filing
Officia	al Form 1	06D					
		<del></del>	Who Have Claims	Secure	ed by Propert	V	12/15
							mation. If more space
is needed	d, copy the Add						
1. Do any	creditors have	e claims secured by	your property?				
	No. Check this	box and submit th	nis form to the court with your oth	er schedules.	You have nothing else	to report on this form	
	res. Fill in all	of the information I	pelow.				
Part 1:	List All Se	cured Claims					
2. List a	II secured clain	ns. If a creditor has r	nore than one secured claim. list the o	creditor separate	Column A	Column B	Column C
for each	claim. If more t	han one creditor has	a particular claim, list the other credit	ors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as	First Name Middle Name Last Name  of 2 set f, filing)  First Name Middle Name Last Name  of States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space ded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case or (if known).  Any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes. Fill in all of the information below.  Last Name  Last Name  Check if this is an amended filing  12/15  Column A  Column B  Column C						
		lio Servicing	Describe the property that secure	s the claim:	\$535,289.00	\$500,000.00	\$35,289.00
Cre	editor's Name			nlands, NJ			
		ood Park	As of the date you file the claim is	S: Chack all that			
		EL 20050	apply.	3. Check all that			
	<u> </u>						
Nu	mber, Street, City,	State & Zip Code	_ :				
Who ow	es the debt?	Check one.	•	<b>/</b> .			
Debte	or 1 only		- · · · · · · · · · · · · · · · · · · ·	as mortgage or s	secured		
Debte	or 2 only		car loan)				
_		•		nechanic's lien)			
			☐ Judgment lien from a lawsuit	Circt Mon	<del>1</del>		
		relates to a	Other (including a right to offset)	FIRST IVIOR	tgage		
		Opened					
		•					
		Active		0500			
Date del	ot was incurred	8/06/20	Last 4 digits of account nu	mber 6592	<u>′</u>		
Add th	e dollar value	of your entries in C	olumn A on this nage. Write that nu	ımher here	\$535.2 <u>9</u>	89 00	
		=	: =				
Write t	that number he	ere:			\$535,20	59.00	
Part 2:	List Others	to Be Notified fo	r a Debt That You Already Liste	ed			
					ou already listed in Part 1	. For example, if a col	lection agency is
trying to	collect from y creditor for a	ou for a debt you on ny of the debts that	we to someone else, list the credito you listed in Part 1, list the additio	or in Part 1, and	I then list the collection a	gency here. Similarly,	if you have more
[]							
			Zip Code	On w	hich line in Part 1 did you e	enter the creditor? 2.1	_
	701 Market	Street, Suite 50	000	Last	4 digits of account number		
	Philadelphi	a, PA 19106					

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Debtor	1 Nora E. Cucalon First Name Middle Name	Nora E. Cucalon		Case number (if known)
	First Name	Middle Name	Last Name	
	Name, Number, Street, O Monmouth County 2500 Kozloski Roa Freehold, NJ 0772	y Sheriff's Office ad		On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
	Name, Number, Street, ( Phelan Hallinan D 1617 JFK Bouleva Philadelphia, PA 1	iamond & Jones, P ord, Suite 1400	С	On which line in Part 1 did you enter the creditor?  Last 4 digits of account number

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		Document	Page 21	L of 51			
Fill in this	information to identify your	case:					
Debtor 1	Nora E. Cucalon						
DODIOI 1	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filin	g) First Name	Middle Name	Last Name				
United Stat	es Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	<i>(</i>				
0							
Case numb					П	Check if this is an	
,						amended filing	
	Form 106E/F						
<u>Schedu</u>	le E/F: Creditors W	ho Have Unsecured	d Claims			12/15	
Schedule G: Schedule D: left. Attach th name and ca	ry contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Secine Continuation Page to this pag se number (if known).	ired Leases (Official Form 106G) ured by Property. If more space i e. If you have no information to i	. Do not include s s needed, copy t	any creditors with partially sec the Part you need, fill it out, nu	ured clain	ms that are listed in entries in the boxes on the	
	List All of Your PRIORITY Un creditors have priority unsecure						
^	. ,	u ciainis against you?					
	Go to Part 2.						
☐ Yes.							
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims					
3. Do any	creditors have nonpriority unsec	ured claims against you?					
□ No. \	You have nothing to report in this pa	art. Submit this form to the court wi	th vour other sche	edules.			
_			,				
Yes.							
unsecur	of your nonpriority unsecured classed claim, list the creditor separately a creditor holds a particular claim, li	for each claim. For each claim list	ed, identify what t	ype of claim it is. Do not list claim	s already	included in Part 1. If more	
						Total claim	
4.1 <b>Ca</b>	pital One Bank Usa N	Last 4 digits of a	ccount number	2642		\$745.00	
	npriority Creditor's Name						
Po	Box 30285	When was the de	ht incurred?	Opened 03/15 Last Ac 03/21	tive		
Sa	It Lake City, UT 84130						
	mber Street City State Zip Code	As of the date yo	u file, the claim i	s: Check all that apply			
	o incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent	☐ Contingent				
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and and		ORITY unsecured	d claim:			
	Check if this claim is for a comm						
dek Is t	ot he claim subject to offset?	☐ Obligations arise		ration agreement or divorce that	you did no	ot	
	-			g plans, and other similar debts			
	Yes	Other. Specify					
	100	Other. Specify	Ji Cuit Galu	<u> </u>			

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Deb	Nora E. Cucaion		Case number (if known)	
4.2	Comenitybank/victoria	Last 4 digits of account number	1153	\$412.00
	Nonpriority Creditor's Name Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 11/18 Last Active 03/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim.	
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other. Specify Charge Ac	count	
4.3	Comenitycb/myplacerwds	Last 4 digits of account number	2790	\$458.00
	Nonpriority Creditor's Name Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 07/18 Last Active 04/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Ac	count	
4.4	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	3077	\$1,101.00
	Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 11/18 Last Active 02/21	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	og plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	= -	
		- Other Opcomy		

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Debt	Nora E. Cucaion	<u> </u>	Case number (if known)	
4.5	Credit One Bank Na	Last 4 digits of account number	2437	\$881.00
	Nonpriority Creditor's Name Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 1/09/20 Last Active 9/18/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	First Premier Bank	Last 4 digits of account number	3848	\$1,494.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 08/17 Last Active 02/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharir	ag plane, and other similar debte	
	■ No □ Yes	Other. Specify Credit Card		
	163	Other. Specify Ordan Gard	<u>*</u>	
4.7	First Premier Bank	Last 4 digits of account number	3367	\$1,011.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 03/15 Last Active 01/21	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation</li></ul>	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	· · · · · · · · · · · · · · · · · · ·	
	No	Debts to pension or profit-sharing	• •	
	Yes	Other. Specify Credit Card	d	

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1 Nora E. Cucalon	Cas	e number (if known)	
Integrated Medicine Alliance	Last 4 digits of account number 48	305	\$142.00
Nonpriority Creditor's Name PO Box 8519	When was the debt incurred? 20	220	
Red Bank, NJ 07701	when was the debt incurred?	020	
Number Street City State Zip Code	As of the date you file, the claim is: C	heck all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separatio report as priority claims	n agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing pla	ans, and other similar debts	
Yes	■ Other Specify Medical charge		
Kohls/capone Nonpriority Creditor's Name	Last 4 digits of account number 19	950	\$598.00
•	0	pened 06/15 Last Active	
Po Box 3043		3/21	
Milwaukee, WI 53201  Number Street City State Zip Code		hook all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: C	песк ан тлат арргу	
Debtor 1 only	Пол		
_	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separatio report as priority claims</li> </ul>	n agreement or divorce that you did not	
No	Debts to pension or profit-sharing pla	ans, and other similar debts	
■ No	, , ,		
□ Yes	Other. Specify Charge Accou	<u> </u>	
Laridian Consulting Inc.	Last 4 digits of account number 90	039	\$3,314.99
Nonpriority Creditor's Name			
577 Hamburg Turnpike	When was the debt incurred? 20	008	
Wayne, NJ 07470  Number Street City State Zip Code	As of the date you file the claim in C	hock all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: C	песк ан шасарру	
Debtor 1 only	Continuent		
_ ′	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	im.	
At least one of the debtors and another	Type of NONPRIORITY unsecured cla	IIII:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separatio report as priority claims	n agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing pla	ans, and other similar debts	
Yes	■ Other. Specify Direct Merchai	nts debt	

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Nora E. Cucaion		Case number (if known)	
NJ EZ-Pass	Last 4 digits of account number		\$1,500.0
Nonpriority Creditor's Name 375 McCarter Hwy Newark, NJ 07114	When was the debt incurred?	2020	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Toll charge	es	
Phoenix Financial Services, LLC	Last 4 digits of account number	1974	\$486.
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 361450	When was the debt incurred?	Opened 05/21 Last Active 01/19	*****
Indianapolis, IN 46236 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	_	<b>в.</b> Опеск ан тыт арру	
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure  ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	a plans, and other similar debts	
□ Yes		Attorney Monmouth Emerg Med	
Remex Inc	Last 4 digits of account number	6984	\$246.
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 765	When was the debt incurred?	Opened 04/21 Last Active 10/20	
Rocky Hill, NJ 08553  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Collection  Other. Specify  Hbs	Attorney University Radiology	

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Debto	Nora E. Cucalon		Case number (if known)							
4.1	Domov Inc		2227	¢4.E7.00						
4	Remex Inc  Nonpriority Creditor's Name	Last 4 digits of account number		\$157.00						
	Attn: Bankruptcy		Opened 12/19 Last Active							
	PO Box 765	When was the debt incurred?	06/19							
	Rocky Hill, NJ 08553  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply							
	Who incurred the debt? Check one.									
	Debtor 1 only	☐ Contingent								
	□ Debtor 2 only □ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:							
	☐ Check if this claim is for a community	☐ Student loans								
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims								
	No	Debts to pension or profit-sharing	g plans, and other similar debts							
	☐ Yes	Other. Specify  Collection Tinton Fa	Attorney University Radiology							
4.1	Remex Inc	Last 4 digits of account number	7318	\$72.00						
	Nonpriority Creditor's Name	_								
	PO Box 765 Rocky Hill, NJ 08553	When was the debt incurred?	Opened 10/19 Last Active 05/19							
	Number Street City State Zip Code  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.									
	Debtor 1 only	☐ Contingent								
	☐ Debtor 2 only ☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only ☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:							
	☐ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not							
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts							
	☐ Yes	Other. Specify  Collection Tinton Fa	Attorney University Radiology							
4.1	Security Credit Servic	Last 4 digits of account number	8190	\$719.00						
	Nonpriority Creditor's Name	_								
	306 Enterprise Drive Oxford, MS 38655	When was the debt incurred?	Opened 06/16 Last Active 10/15							
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply							
	■ Debtor 1 only	☐ Contingent								
	☐ Debtor 2 only ☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only ☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:							
	☐ Check if this claim is for a community	☐ Student loans								
	debt		ration agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts								
	■ No									
	☐ Yes	Other Specify Collection	Attorney Tempoe Llc							

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Debtor	1 Nora E. Cucalon		Case number (if known)					
4.1	Security Credit Servic  Nonpriority Creditor's Name	Last 4 digits of account number	8191	\$538.00				
	306 Enterprise Drive Oxford, MS 38655	When was the debt incurred?	Opened 06/16 Last Active 10/15					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No		☐ Student loans ☐ Obligations arising out of a separeport as priority claims						
		☐ Debts to pension or profit-sharin	ng plans, and other similar debts					
	☐ Yes	■ Other. Specify Collection	•					
4.1	Security Credit Services  Nonpriority Creditor's Name	Last 4 digits of account number	8189	\$826.00				
	Attn: Bankruptcy PO Box 1156 Oxford, MS 38655	When was the debt incurred?	Opened 06/16 Last Active 8/07/20					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only							
	☐ Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharin						
	Yes	Other. Specify Collection						
4.1	Waterfall Revenue Group	Last 4 digits of account number	2110	\$385.00				
9	Nonpriority Creditor's Name			4000.00				
	Attn: Bankruptcy 2297 St Hwy 33 Ste 906 Trenton, NJ 08690	When was the debt incurred?	Opened 01/21 Last Active 11/19					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Collection Attorney Endoscopy Center Of  ☐ Yes ☐ Other. Specify Red Bank							

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Debtor	Nora E.	Cucalon	Document Page 2		umber (if known)					
4.2	Waterfall	Revenue Group	Last 4 digits of account number	8142	<u> </u>		\$128.00			
	Attn: Ban	wy 33 Ste 906	When was the debt incurred?	Opened 06/20 Last Active						
		et City State Zip Code  d the debt? Check one.	As of the date you file, the claim	n is: Check	k all that apply					
	■ Debtor 1 o	only	☐ Contingent							
	Debtor 2 o	only	☐ Unliquidated							
	Debtor 1 a	and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:							
	☐ At least or	ne of the debtors and another								
		his claim is for a community	☐ Student loans	☐ Student loans						
	debt	subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	■ No		☐ Debts to pension or profit-sharing plans, and other similar debts							
	☐ Yes		Other. Specify Collection	Attorn	ey Allied Dig	estive Health				
Dow 2.	Liet Othe	are to De Netified About a l	Dobt That Voy Already Listed							
Part 3:			Debt That You Already Listed			. 4 0 . 5				
is tryin have n	ng to collect f	rom you for a debt you owe to	d about your bankruptcy, for a debt that someone else, list the original creditor i that you listed in Parts 1 or 2, list the add at or submit this page.	in Parts 1	or 2, then list the	e collection agency here	. Similarly, if you			
	nd Address	,	On which entry in Part 1 or Part 2 did yo		•	ority Unsecured Claims				
	inton Stree	et	/			npriority Unsecured Claims	2			
Norwo	od, MA 02	062	Last 4 digits of account number	— T alt 2.	Creditors with No	inpriority Orisecured Claims	,			
	nd Address		On which entry in Part 1 or Part 2 did yo		•					
	uch Kahn ury Drive,	& Shepard, PC				ority Unsecured Claims				
	pany, NJ (		Part 2: Creditors with Nonpriority Unsecured Claims							
			Last 4 digits of account number							
Part 4:	Add the	Amounts for Each Type of	Unsecured Claim							
	he amounts of unsecured of		claims. This information is for statistical	reporting	purposes only.	28 U.S.C. §159. Add the a	amounts for each			
					Tot	al Claim				
Total	68	a. Domestic support obligation	ons	6a.	\$	0.00				
claims from Pai	r <b>t 1</b> 6k	. Taxes and certain other de	ebts you owe the government	6b.	\$	0.00				
	60	c. Claims for death or person	nal injury while you were intoxicated	6c.	\$	0.00				
	60	d. Other. Add all other priority	unsecured claims. Write that amount here.	6d.	\$	0.00				
	66	e. Total Priority. Add lines 6a	through 6d.	6e.	\$	0.00				
					_					
Total	6f	. Student loans		6f.	*	al Claim 0.00				
claims from Pai	r <b>t 2</b> 60	g. Obligations arising out of	a separation agreement or divorce that	_		0.00				
		you did not report as prior		6g.	\$	0.00				
	6i		rity unsecured claims. Write that amount	6h. 6i.	<b>5</b>	0.00				
	01	horo	,ooo.oo oanno. Trino triat amount	٥	\$	15,213.99				

Total Nonpriority. Add lines 6f through 6i.

15,213.99

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Fill in this infor	mation to identify your	case:	V	
Debtor 1	Nora E. Cucalon			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY	
Case number				
(if known)				☐ Check if this is a amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	
	•				

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		Ducume	iii raye so c	li OT	
Fill in this	information to identify you	r case:	V		
Debtor 1	Nora E. Cucalor	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
	0,				
United Sta	ites Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case num (if known)	ber				☐ Check if this is an
					amended filing
Officia	l Form 106H				
	lule H: Your Co	debtors			12/15
SCHEU	iule II. Toul Col	ACDIOI 3			12/15
our name	ind number the entries in the and case number (if know) you have any codebtors? (if	n). Answer every question		, -	p of any Additional Pages, write
1. 00	you have any codebtors: (	i you are illing a joint case,	do not list either spouse	as a codebior.	
■ No □ Yes	3				
	hin the last 8 years, have yo aa, California, Idaho, Louisian				ty states and territories include )
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former sp	ouse, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only 106D), Schedule E/F (Offici	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
out Co	olumn 2.				
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lir	ne
	Number Street			_	
	City	State	ZIP Code		
				_	
3.2	Name			Schedule D, lir	
				☐ Schedule E/F,☐ Schedule G, lir	
_	N			— Scriedule G, III	
	Number Street City	State	ZIP Code		

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	to the total and the total	·									
	in this information to btor 1	Nora E. Cuc									
	btor 2 buse, if filing)					_					
Uni	ited States Bankrupt	cy Court for the	: DISTRICT OF NEW J	ERSEY							
	se number nown)								ed filing ent showin	g postpetition ollowing date:	
<u>O</u>	fficial Form	<u>106l</u>					N	1M / DD/ Y	YYYY		
S	chedule I: \	Your Inc	ome								12/15
spo atta	ouse. If you are sepa ich a separate shee	arated and you t to this form. Employment	are married and not filing wing the top of any addition the top of any addition	th you, do not inclu	ude infor	mati	on abou	t your spe	ouse. If mo	ore space is	needed,
1.	information.			Debtor 1						ling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Empl	oyed mployed			
	information about employers.	information about additional		☐ Not employed				□ Not e	mpioyea		
	Include part-time,	seasonal, or	Occupation	Guest Services							
	self-employed wor	k.	Employer's name	NC Luxury Trav	vel LLC						
	Occupation may in or homemaker, if it		Employer's address	137 Marina Bay Highlands, NJ (							
			How long employed t	here? 14 moi	nths			_			
Pa	rt 2: Give Det	ails About Mor	nthly Income								
	imate monthly inco use unless you are s		ate you file this form. If	you have nothing to ı	report for	any	line, write	e \$0 in the	space. Inc	clude your noi	n-filing
	ou or your non-filing s e space, attach a se		ore than one employer, co	ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Del	btor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	2	,166.66	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross I	ncome. Add lir	ne 2 + line 3.		4.	\$	2,1	66.66	\$	N/A	

Deb	or 1	Nora E. Cucalon		_	(	Case n	iumber ( <i>if ki</i>	nown)				
						For I	Debtor 1			Debtor -filing s		
	Cop	y line 4 here		4.		\$	2,166	6.66	\$	9	N/A	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Secur	ity deductions	5a		\$	(	0.00	\$		N/A	
	5b.	Mandatory contributions for reti	rement plans	5b		\$	(	0.00	\$		N/A	
	5c.	Voluntary contributions for retire	ement plans	5c.		\$	(	0.00	\$		N/A	
	5d.	Required repayments of retirement	ent fund loans	5d		\$	(	0.00	\$		N/A	
	5e.	Insurance		5e		\$		0.00	\$_		N/A	
	5f.	Domestic support obligations		5f.		\$		0.00	\$_		N/A	
	5g.	Union dues		5g		\$		0.00	—		N/A	
	5h.	Other deductions. Specify:		5h	.+	\$			+ \$		N/A	
6.	Add	I the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(	0.00	\$_		N/A	
7.	Cal	culate total monthly take-home pay	Subtract line 6 from line 4.	7.		\$	2,166	6.66	\$		N/A	
8.	List 8a.	all other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b	and from operating a business, ty and business showing gross	_								
		monthly net income.		8a		\$		0.00	\$_		N/A	
	8b. 8c.	Interest and dividends	ou, a non-filing spouse, or a dependen	8b.		\$		0.00	\$_		N/A	
	8d. 8e.	regularly receive	child support, maintenance, divorce	8c. 8d. 8e		\$ \$	(	0.00 0.00 0.00	\$ \$		N/A N/A N/A	
	8f.	Other government assistance th	at you regularly receive	00	•	Ψ		J.UU	Ψ_		IN/A	
		Include cash assistance and the va	alue (if known) of any non-cash assistanc nps (benefits under the Supplemental	8f.		\$		0.00	\$ \$		N/A	
	8g.	Pension or retirement income	Household contributions from	8g	•	\$		0.00	Φ_		N/A	
	8h.	Other monthly income. Specify:		8h	.+	\$	2,350	0.00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.	5	\$	2,350	0.00	\$		N/A	<u>\</u>
10	Cald	culate monthly income. Add line 7	Lline Q	10.	\$		,516.66	<b>1</b> ¢		N/A	_ \$	4,516.66
		the entries in line 10 for Debtor 1 and			Ψ_	-	,510.00			17/7	-	4,010.00
11.	Incluothe Do r	ude contributions from an unmarried per friends or relatives.	the expenses that you list in Schedule partner, members of your household, you added in lines 2-10 or amounts that are not	r depe						Schedule 11.		0.00
12.		te that amount on the Summary of Sc	ine 10 to the amount in line 11. The re hedules and Statistical Summary of Certa							12.	\$	4,516.66
13.	Do y	No.	e within the year after you file this form	1?								/ income
		Yes. Explain:										

Official Form 106l Schedule I: Your Income page 2

Fill	n this informa	ation to identify yo	our case:					
Debt	tor 1	Nora E. Cuc	alon			Che	ck if this is:	
Debt	tor 2 buse, if filing)						An amended filing A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unite	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	
Case	e numbe <b>r</b>							
(If kr	nown)							
Of	ficial Fo	rm 106J						
		J: Your	Exper	ises				12/15
Be a	as complete rmation. If m	and accurate as	s possible eded, atta	If two married people ar ch another sheet to this				
Part	1: Desci	ribe Your House	ehold					
••	■ No. Go to							
			in a separ	ate household?				
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2				a				
2.	Do you nav	e dependents?	_	Fill out this information for	Dependent's relati	ionshin to	Dependent's	Does dependent
	Debtor 2.	ebior i and	☐ Yes.	each dependent	Debtor 1 or Debtor		age	live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								□ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.		oenses include	han <b>I</b>	No				
		f people other t d your depende		Yes				
Part	2: Estim	ate Your Ongoi	na Monthi	v Expenses				
Esti exp	mate your ex	xpenses as of y a date after the	our bankr	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the solution of the solut	orm as a sı 9 <i>J</i> , check t	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
the	ude expense value of suc icial Form 10	h assistance an	non-cash d have ind	government assistance i luded it on <i>Schedule I:</i> \	f you know 'our Income		Your exp	enses
Ì								
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage	e 4. :	\$	2,000.00
	If not include	ded in line 4:						
		estate taxes				4a.	·	0.00
	•	erty, homeowner'	-	's insurance Ipkeep expenses		4b. 3 4c. 3		0.00
		emaintenance, re eowner's associa				4d. 3		150.00 0.00
5.				our residence, such as ho	me equity loans	5.	·	0.00

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Debtor 1	Nora E.	Cucalon	Case num	nber (if known)	
1 14:11	ition		-	_	
6. <b>Util</b> i 6a.	ities:	heat, natural gas	6a.	<b>¢</b>	190.00
6b.		wer, garbage collection	6b.	·	145.00
		e, cell phone, Internet, satellite, and cable services	6c.	·	
6c.				·	290.00
6d.	Other. Sp		6d.	· -	0.00
		ekeeping supplies	7.	·	600.00
		children's education costs	8.	·	0.00
	•	ry, and dry cleaning	9.	·	100.00
	•	products and services	10.	\$	200.00
1. <b>Me</b> c	dical and de	ntal expenses	11.	\$	120.00
		Include gas, maintenance, bus or train fare. ar payments.	12.	\$	180.00
		clubs, recreation, newspapers, magazines, and bool	k <b>s</b> 13.	\$	140.00
		ributions and religious donations	14.		0.00
	urance.		17.	T	0.00
		nsurance deducted from your pay or included in lines 4 o	r 20.		
	. Life insura	, , ,	15a.	\$	79.67
	. Health ins		15b.	·	0.60
	. Vehicle in		15c.	· -	0.00
			15d. 15d.	·	
		Irance. Specify:		Ψ	0.00
Spe	cify: Estin	clude taxes deducted from your pay or included in lines nated Income Taxes	4 or 20. 16.	\$	100.00
		ease payments: ents for Vehicle 1	17a.	\$	0.00
			17a. 17b.	·	0.00
		ents for Vehicle 2		·	
	. Other. Sp		17c.	· -	0.00
	. Other. Sp		17d.	<b>&gt;</b>	0.00
		of alimony, maintenance, and support that you did r your pay on line 5, Schedule I, Your Income (Official		\$	0.00
		s you make to support others who do not live with yo		\$	0.00
	cify:	·	19.	-	
		erty expenses not included in lines 4 or 5 of this forr	n or on Schedule I: Yo	our Income.	
		s on other property	20a.		0.00
20b	. Real estat	e taxes	20b.	\$	0.00
20c	. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		er's association or condominium dues	20e.	·	0.00
	er: Specify:	and the second s		+\$	0.00
				- Ψ	0.00
	-	monthly expenses			4 00 - 0-
	. Add lines 4	<u> </u>		\$	4,295.27
		2 (monthly expenses for Debtor 2), if any, from Official F	orm 106J-2	\$	
22c	. Add line 22	a and 22b. The result is your monthly expenses.		\$	4,295.27
3. <b>Cal</b>	culate your	monthly net income.			
	•	12 (your combined monthly income) from Schedule I.	23a.	\$	4,516.66
		monthly expenses from line 22c above.	23b.	·	4,295.27
	, , 500	. ,	200.	Ţ	.,200121
23c		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	221.39
		- y			
24. <b>Do</b> 9	you expect	an increase or decrease in your expenses within the	year after you file this	s form?	
		ou expect to finish paying for your car loan within the year or do y terms of your mortgage?	ou expect your mortgage	payment to increase	e or decrease because of a
		tomic or your mongage:			
<b>I</b>					
	res.	Explain here:			

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	rmation to identify your			
Debtor 1	Nora E. Cucalon			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
				_
Case number (if known)				Check if this is an amended filing
Official For	m 106Dec			
Declara	tion About a	an Individual De	btor's Schedule	<b>!S</b> 12/15
Sig	gn Below			
Did you pa	ay or agree to pay some	one who is NOT an attorney to	help you fill out bankruptcy for	rms?
■ No				
_	Name of person			ch <i>Bankruptcy Petition Preparer's Notice,</i> Slaration, and Signature (Official Form 119)
☐ Yes. Under pena		that I have read the summary a	Dec	elaration, and Signature (Official Form 119)
☐ Yes. Under penathat they are	alty of perjury, I declare	that I have read the summary a	Dec	elaration, and Signature (Official Form 119)
Under penathat they as	alty of perjury, I declare re true and correct.	that I have read the summary a	Dec	elaration, and Signature (Official Form 119)

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	in this inform					
		nation to identify you				
Deb	tor 1	Nora E. Cucalon First Name	Middle Name	Last Name		
Deb	tor 2					
(Spot	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY		
Cas (if kno	e number				_	theck if this is an mended filing
Sta Be a	s complete a	of Financial	ble. If two married people a		ankruptcy equally responsible for sup	
		i). Answer every ques		tins form. On the top of any	additional pages, write you	ir name and case
			rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	■ Married □ Not mar	ried				
2.	During the la	ist 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	:	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,500.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Nora E. Cucalon Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$5,085.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$12,144,00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?  $\square$  No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Total amount

paid

Amount you

still owe

Dates of payment

**Creditor's Name and Address** 

Was this payment for ...

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Debtor 1 Nora E. Cucalon Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number US Bank NA v. Nora Cucalon **Foreclosure** Superior Court - Monmouth Pending F-17949-17 County ☐ On appeal 71 Monument Street □ Concluded Freehold, NJ 07728 At Sheriff Sale Laridian Consulting Inc. v. Nora Breach of Superior Court - Monmouth Pending Cucalon Contract County ☐ On appeal DC-04999-18 71 Monument Street □ Concluded Freehold, NJ 07728 At Bank Levy motion 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ☐ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 

Official Form 107

Property was attached, seized or levied.

**PNC Bank account** 

□ Property was repossessed.□ Property was foreclosed.□ Property was garnished.

Laridian Consulting Inc.

577 Hamburg Turnpike Wayne, NJ 07470

\$2,500.00

9-15-2021

11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No  Yes. Fill in the details.								
	Creditor Name and Address	Des	scribe the action the creditor took	Date action was	Amount				
				taken					
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		as any of your property in the possession of an er official?	assignee for the bene	fit of creditors, a				
	No								
	☐ Yes								
Pai	t 5: List Certain Gifts and Contributions	s							
13.	■ No	uptcy, d	lid you give any gifts with a total value of more t	han \$600 per person?	•				
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$60	0	Describe the gifts	Dates you gave	Value				
	per person		besome the girls	the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankru	uptcy, d	lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?				
	■ No □ Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that to		Describe what you contributed	Dates you	Value				
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	)	ŕ	contributed					
Pai	t 6: List Certain Losses								
		otcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster				
	■ No.								
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and	Describ	be any insurance coverage for the loss	Date of your	Value of property				
	how the loss occurred		the amount that insurance has paid. List pending ce claims on line 33 of <i>Schedule A/B: Property</i> .	loss	lost				
Pai	t 7: List Certain Payments or Transfers		, ,						
	·		d you or anyone else acting on your behalf pay	or transfer any proper	ty to anyone you				
10.	consulted about seeking bankruptcy or p	reparin			ty to anyone you				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	OU	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Law Offices of Steven A. Serna LLC 5300 Bergenline Avenue Suite 300 West New York, NJ 07093 bk@sernaesq.com		Attorney Fees		\$2,600.00				

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Debtor 1 Nora E. Cucalon Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any p transferred	roperty	Date payment or transfer was made	Amount of payment		
	001 Debtorcc, Inc. 378 Summit Avenue Jersey City, NJ 07306	Credit Counseling		9/28/21	\$19.95		
	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors on Do not include any payment or transfer that you lis	or to make payments to your cred		or transfer any proper	ty to anyone who		
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any p transferred	roperty	Date payment or transfer was made	Amount of payment		
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busing		ransfer any prop	perty to anyone, other	than property		
	Include both outright transfers and transfers made include gifts and transfers that you have already lis  No  Yes. Fill in the details.	as security (such as the granting of	a security interes	st or mortgage on your	property). Do not		
	Person Who Received Transfer	Description and value of	Describe	any property or	Date transfer was		
	Address Person's relationship to you	property transferred		received or debts	made		
	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		a self-settled tr	ust or similar device c	of which you are a		
	Name of trust	Description and value of the pr	operty transferr	red	Date Transfer was made		
Par	List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, and S	Storage Units				
	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or of	ther financial accounts; certificate	es of deposit; sl				
	houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes, Fill in the details.						
		st 4 digits of Type of acc count number instrument	clo	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer		
	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy,	any safe deposi	it box or other deposit	tory for securities,		
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the	contents	Do you still have it?		

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Debtor 1 Nora E. Cucalon Case number (if known)

22.	2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the	contents	Do you still have it?				
Par	19: Identify Property You Hold or Control for S	Someone Else							
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any prope	rty you borrowe	ed from, are storing for	, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the	property	Value				
Par	t 10: Give Details About Environmental Informa	tion							
For	the purpose of Part 10, the following definitions a	apply:							
-	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, groun stances, wastes, or material.	dwater, or other	r medium, including sta	atutes or				
_	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	law, whether yo	ou now own, operate, c	or utilize it or used				
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, hazard	ous substance, toxic s	substance,				
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n they occurred	l.					
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in vic	olation of an environme	ental law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State at ZIP Code)		ental law, if you	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State at ZIP Code)		ental law, if you	Date of notice				
26.	Have you been a party in any judicial or adminis	trative proceeding under any env	ironmental law	? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	case	Status of the case				
Par	t11: Give Details About Your Business or Conr	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, d	•	•	•	business?				
	☐ A sole proprietor or self-employed in a tr —	•		or part-time					
	■ A member of a limited liability company (LLC) or limited liability partnership (LLP)								

	☐ A partner in a partnership							
	☐ An officer, director, or managing €	executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	□ No. None of the above applies. Go to Part 12.							
	Yes Check all that apply above and t	fill in the details below for each business.						
	Business Name	Describe the nature of the business	Employer	Identification number				
	Address Name Address Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Identification number clude Social Security number or ITIN.				
		name of accountant of accidiosper	Dates bus	siness existed				
	Panda Transport LLC	School Bus Transport services	EIN:	47-2315822				
	137 Marina Bay Court Highlands, NJ 07732	(presently on hold due to pandamic)	From-To	2015-present				
_		Ruben Gonzalez						
	N O N Transport Inc. 137 Marina Bay Ct.	Transport services	EIN:	20-3521248				
	Highlands, NJ 07732	Ruben Gonzalez	From-To	2008-present				
	Name Address	Date Issued						
(	Number, Street, City, State and ZIP Code)							
Part 1	12: Sign Below							
with a 18 U.S	ue and correct. I understand that making	Financial Affairs and any attachments, and I a false statement, concealing property, or co \$250,000, or imprisonment for up to 20 years.  Signature of Debtor 2	btaining mo	oney or property by fraud in connection				
_								
Date	October 8, 2021	Date						
Did you ■ No □ Yes	, ,	ment of Financial Affairs for Individuals Filin	ng for Bankru	uptcy (Official Form 107)?				
Did yo	ou pay or agree to pay someone who is n	oot an attorney to help you fill out bankruptc	-					
☐ Yes	s. Name of Person Attach the <i>Bank</i>	rruptcy Petition Preparer's Notice, Declaration, a	and Signature	e (Official Form 119).				

Fill in this information to identify your case:						
Debtor 1	Nora E. Cucalon					
Debtor 2 (Spouse, if filing)						
United States B	United States Bankruptcy Court for the: District of New Jersey					
Case number (if known)						

Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:						
<ul> <li>1. Disposable income is not determined u</li> <li>11 U.S.C. § 1325(b)(3).</li> </ul>							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
■ 3. The commitment period is 3 years.							
	4. The commitment period is 5 years.						

 $\hfill\square$  Check if this is an amended filing

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - ☐ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debt		Column Debtor non-fili	
<ol><li>Your gross wages, salary, tips, bonuses, overtime payroll deductions).</li></ol>	e, and co	ommissio	ons (before all	\$	2,166.67	\$	0.00
<ol> <li>Alimony and maintenance payments. Do not included Column B is filled in.</li> </ol>	le payme	ents from	a spouse if	\$	0.00	\$	0.00
<ol> <li>All amounts from any source which are regularly pof you or your dependents, including child support from an unmarried partner, members of your househo and roommates. Do not include payments from a sporyou listed on line 3.</li> <li>Net income from operating a business,</li> </ol>	<b>rt.</b> Includ	de regulai depende not includ	contributions nts, parents,	\$	2,350.00	\$	0.00
profession, or farm	\$	0.00					
Gross receipts (before all deductions)	-\$	0.00					
Ordinary and necessary operating expenses  Net monthly income from a business, profession, or fa	* -		Copy here ->	\$	0.00	\$	0.00
6. Net income from rental and other real property	Debto						
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from rental or other real property	_	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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ebtor 1	Nora E. Cucalon			Case numbe	r (if known)			
				Column A Debtor 1		Column B Debtor 2 non-filing	or	
7. Into	erest, dividends, and royalties			\$	0.00	\$	0.00	
8. <b>Un</b>	employment compensation			\$	0.00	\$	0.00	
	not enter the amount if you contend that Social Security Act. Instead, list it here:	the amount received was a be	nefit under					
	For you	\$	0.00					
F	or your spouse	\$	0.00					
9. Pei ber not Uni disa pay doe	nsion or retirement income. Do not include the fit under the Social Security Act. Also, expended any compensation, pension, pay ited States Government in connection with ability, or death of a member of the uniformy paid under chapter 61 of title 10, then increase not exceed the amount of retired pay to etired under any provision of title 10 other	ude any amount received that except as stated in the next set, annuity, or allowance paid by h a disability, combat-related it med services. If you received a clude that pay only to the exte or which you would otherwise b	ntence, do the njury or any retired nt that it	\$	0.00	\$	0.00	
Do und cor crir cor Go dea	nome from all other sources not listed a not include any benefits received under the rederal law relating to the national der the National Emergencies Act (50 U.S onavirus disease 2019 (COVID-19); payme, a crime against humanity, or internation pensation, pension, pay, annuity, or allowernment in connection with a disability, of ath of a member of the uniformed services parate page and put the total below.	he Social Security Act; payme I emergency declared by the F c.C. 1601 et seq.) with respect nents received as a victim of a onal or domestic terrorism; or wance paid by the United Stat combat-related injury or disabil	nts made President to the war es ity, or					
	, , , , , , , , , , , , , , , , , , , ,			\$	0.00	\$	0.00	
	-			\$	0.00	\$	0.00	
	Total amounts from separate pages	: if any		\$	0.00	\$	0.00	
ead	Iculate your total average monthly incoch column. Then add the total for Column	A to the total for Column B.	r \$	4,516.67	+ \$_	0.00		4,516.67
art 2:	Determine How to Measure Your Depty your total average monthly income						\$	4,516.67
13. <b>Ca</b>	Iculate the marital adjustment. Check o	ne:					Ť	4,010.01
	You are not married. Fill in 0 below.							
	You are married and your spouse is filir	ng with you. Fill in 0 below.						
	You are married and your spouse is not	t filing with you						
	Fill in the amount of the income listed in dependents, such as payment of the sp	n line 11, Column B, that was N						
	Below, specify the basis for excluding the adjustments on a separate page.		income dev	voted to each	n purpos	e. If necessar	y, list addi	tional
	If this adjustment does not apply, enter		<b>ው</b>					
			•		_			
					_			
			_ •• _					
	Total		\$	0.0	<u>0</u> с	opy here=>		0.00
4. <b>Y</b> (	our current monthly income. Subtract I	ine 13 from line 12.					\$	4,516.67
	alculate your current monthly income f	for the year. Follow these ste	ps:				¢	4,516.67

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Debtor 1	Nora E. Cucalon	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).		<b>x</b> 12
15	b. The result is your current monthly income for the year for this pa	art of the form.	\$54,200.04

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Nora E. Cucalon Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 2 16b. Fill in the number of people in your household. 88,511.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 4,516.67 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 4.516.67 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 4,516.67 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 54,200.04 20b. The result is your current monthly income for the year for this part of the form 88,511.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Nora E. Cucalon Nora E. Cucalon Signature of Debtor 1 Date October 8, 2021 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Document Page 47 of 51 UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Steven A. Serna 5300 Bergenline Avenue Suite 300 West New York, NJ 07093 201-392-0303 bk@sernaesq.com Nora E. Cucalon In Re: Case No.: Chapter: 13 Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION 1. Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: ■ Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 4,600.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: adversary proceedings, loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: \$ 2,600.00 The balance due is: \$ 2,000.00 The balance □ will ■ will not be paid through the plan. □ Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ . The hourly fee charged by other members of my firm that may provide services to this client range from \$ \_\_\_\_ to \$ \_\_\_\_. I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1. I have received: \$ 2. The source of the funds paid to me was: ■ Debtor(s) □ Other (specify below)

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3.	If a balance is due, the source of future compensation to be paid to me is:								
	■ Debtor(s)	☐ Other (specify below)							
	If I have agreed to share comp	I □ have or ■ have not agreed to share compensation with another person(s) unless they are members of my law I have agreed to share compensation with a person(s) who is not a member of my law firm, a copy of that then and a list of the people sharing in the compensation is attached.							
prior t	r(s) as needed. If possible, De	overage counsel may appear at hearings on their behalf in lieu of counsel retaine or's counsel will advise Debtor(s) of the use of coverage counsel for any hearing wledge that coverage counsel may not be a member of my firm and may or may							
	Debtor	Debtor(s) Initials							
		gree that coverage counsel may appear at hearings on their behalf in lieu of coun appearances related to the Debtor(s) matter will be made by me, the undersigned							
	Debtor	Debtor(s) Initials							
6.	The Debtor(s) have reviewe	this Disclosure and it is consistent with the terms of the Retainer Agreement.							
Date:	October 8, 2021	/s/ Nora E. Cucalon Nora E. Cucalon Debtor							
Date:		Joint Debtor							
Date:	October 8, 2021	/s/ Steven A. Serna							
	•	Steven A. Serna							
		Debtor's Attorney							

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## **United States Bankruptcy Court**District of New Jersey

		District of New Jersey						
In re	Nora E. Cucalon		Case No.					
_		Debtor(s)	Chapter	13				
VERIFICATION OF CREDITOR MATRIX								
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.								
Date:	October 8, 2021	/s/ Nora E. Cucalon						
_		Nora E. Cucalon						

Signature of Debtor

Capital One Bank Usa N Po Box 30285 Salt Lake City, UT 84130

CCS 725 Canton Street Norwood, MA 02062

Comenitybank/victoria Po Box 182125 Columbus, OH 43218

Comenitycb/myplacerwds Po Box 182125 Columbus, OH 43218

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Fein Such Kahn & Shepard, PC 7 Century Drive, Suite 201 Parsippany, NJ 07054

First Premier Bank Attn: Bankruptcy PO Box 5524 Sioux Falls, SD 57117

Integrated Medicine Alliance PO Box 8519 Red Bank, NJ 07701

KML Law Group, PC 701 Market Street, Suite 5000 Philadelphia, PA 19106

Kohls/capone Po Box 3043 Milwaukee, WI 53201

Laridian Consulting Inc. 577 Hamburg Turnpike Wayne, NJ 07470

Monmouth County Sheriff's Office 2500 Kozloski Road Freehold, NJ 07728

NJ EZ-Pass 375 McCarter Hwy Newark, NJ 07114

Phelan Hallinan Diamond & Jones, PC 1617 JFK Boulevard, Suite 1400 Philadelphia, PA 19103

Phoenix Financial Services, LLC Attn: Bankruptcy PO Box 361450 Indianapolis, IN 46236

Remex Inc Attn: Bankruptcy PO Box 765 Rocky Hill, NJ 08553

Remex Inc PO Box 765 Rocky Hill, NJ 08553

Security Credit Servic 306 Enterprise Drive Oxford, MS 38655

Security Credit Services Attn: Bankruptcy PO Box 1156 Oxford, MS 38655

Select Portfolio Servicing 10401 Deerwood Park Blvd Jacksonville, FL 32256

Waterfall Revenue Group Attn: Bankruptcy 2297 St Hwy 33 Ste 906 Trenton, NJ 08690